PTO/SB/06 (08-03)
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October 1 2004 Substitute for Form PTO-875								Application or Docket Number 09/544822		
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY	OR	OTHER THAN SMALL ENTITY			
FOR NUMBER FILED			NUMBER	EXTRA	RATE FE		RATE	FEE		
ASIC FEE 37 CFR 1.16(a))					, <u>3</u>	95 OR		<u>.790</u>		
OTAL CLAIMS			minus 20 =	0 = -		x s 9 =	OR	x s 8 =	<u> </u>	
NDEPENDENT CLAIMS			minus 3	3 = .		× 44 =	O,R	x \$ <u>85</u> =		
37 CFR 1.16(b)) minus 3 = 1 MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ \$ 150 =	OR	+5300=		
If the difference in column 1 is less than zero, enter *0* in column 2.						TOTAL	OR'	TOTAL		
n tne										
	CL מאראו אחני	AIMS AS AME (Column 1)	NDED -	(Column 2)	(Column 3)	SMALL ENTIT	Y OR	OTHER SMALL	THAN ENTITY	
孙	- 18/07	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	TIO	DDI- NAL	RATE	ADDI- TIONAL FEE	
ENDWENT	Total	AMENDMENT	Minus	PAID FOR	- /	9	OR OR	x s /8 =	/	
١٩	(37 CFR 1.16(c)) Independent	65		<u></u>	- / 	11/1	OR	x.88 =	1	
	(37 CFR 1.16(b))				× 844 =	/-1	200			
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4)))					TOTAL	→ OR	TOTAL	 	
		~ •, •				ADD'L FEE		ADD'L FEE	L- /	
		(Column 1)		(Column 2)	(Column 3)		+1	<u>`</u>	1 /	
ENT B		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	TIC	DDI- DNAL EE	RATE	ADDI- TIONAL FEE	
삙	Total	• AMENDMENT	Minus	**	=	x s 4 =	OR	x s /8 =		
ENDM	(37 CFR 1.16(c)) Independent	•	Minus	***	=	x s <u>44</u> =	OR	x \$ <u>88</u> =		
AME	(37 CFR 1.16(b)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s/50=	OR	+,300=		
لـــ	FIRST PRESENT	ATION OF MICEIN E	200, 2,102			TOTAL ADD'L FEE	OR	TOTAL ADD'L FEE		
		(Calumn 1)		(Column 2)	(Column 3)					
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	Ι Ι Ι	DDI- ONAL FEE	RATE	ADDI- TIONAL FEE	
	Total	AMENDMENT	Minus	PAID FOR	=	x 5 9 =	OR	× \$ /8_=	-	
	(37 CFR 1.16(c)) Independent	•	Minus	•••	=	x sQU =	OR	x \$ <u>\$</u> \$ =		
ME	(37 CFR 1.16(b))					1.150	OR	+ \$300 =		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				TOTAL ADD'L FEE	OR	TOTAL 'ADD'L FEE			
		∞lumn 1 is less th Number Previous Number Previousl	ly Paid For	IN THIS SPACE	15 1635 than 20	1 3. , enter "20".		1		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate 30x in Committee 10x in Committ

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2